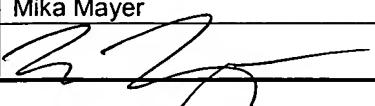
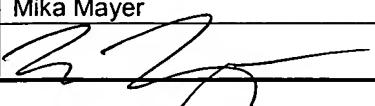
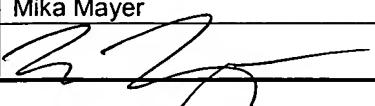


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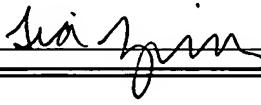
PTO/SB/05 (08-03)
 Approved for use through 07/31/2006. OMB 0651-0032
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 514362001400																								
		First Inventor Gary WELLER																								
		Title DEVICES AND METHODS FOR PLACEMENT OF PARTITIONS WITHIN A HOLLOW BODY ORGAN																								
		Express Mail Label No. EV 336625050 US																								
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																								
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) - 2 pages <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 44] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 52]</p> <p>5. Oath or Declaration [Total Sheets]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small></p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 - 4 pages</p> <p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76.</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____</p> <p>Prior application information: Examiner _____ Art Unit: _____</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p>19. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number: 25226 OR <input type="checkbox"/> Correspondence address below</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Name</td> <td colspan="3"></td> </tr> <tr> <td>Address</td> <td colspan="3"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>Fax</td> <td></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Name (Print/Type)</td> <td>Mika Mayer</td> <td>Registration No. (Attorney/Agent)</td> <td>47,777</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> <td>Date March 9, 2004</td> </tr> </table>			Name				Address				City	State	Zip Code		Country	Telephone	Fax		Name (Print/Type)	Mika Mayer	Registration No. (Attorney/Agent)	47,777	Signature			Date March 9, 2004
Name																										
Address																										
City	State	Zip Code																								
Country	Telephone	Fax																								
Name (Print/Type)	Mika Mayer	Registration No. (Attorney/Agent)	47,777																							
Signature			Date March 9, 2004																							

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 336625050 US, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 9, 2004

Signature: 

(Tia B. Zimmerman)

15870 U.S. PTO
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FEE TRANSMITTAL

for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,301.00)

Complete if Known	
Application Number	Not Yet Assigned
Filing Date	Concurrently Herewith
First Named Inventor	Gary WELLER
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	514362001400

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order Other None
 Deposit Account:

Deposit Account Number 03-1952

Deposit Account Name Morrison & Foerster LLP

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s) Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	385.00
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$ 385.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims	117	-20** =	97 x 9.00 =	873.00
Independent Claims	4	-3** =	1 x 43.00 =	43.00
Multiple Dependent			145.00 =	0.00

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 916.00)

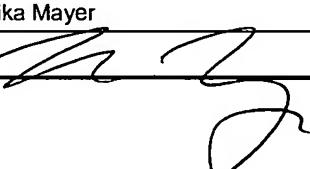
**or number previously paid, if greater; For Reissues, see above

Large Entity	Small Entity	Fee Description				Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		
1053	130	1053	130	Non-English specification		
1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
1251	110	2251	55	Extension for reply within first month		
1252	420	2252	210	Extension for reply within second month		
1253	950	2253	475	Extension for reply within third month		
1254	1,480	2254	740	Extension for reply within fourth month		
1255	2,010	2255	1,005	Extension for reply within fifth month		
1401	330	2401	165	Notice of Appeal		
1402	330	2402	165	Filing a brief in support of an appeal		
1403	290	2403	145	Request for oral hearing		
1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1452	110	2452	55	Petition to revive - unavoidable		
1453	1,330	2453	665	Petition to revive - unintentional		
1501	1,330	2501	665	Utility issue fee (or reissue)		
1502	480	2502	240	Design issue fee		
1503	640	2503	320	Plant issue fee		
1460	130	1460	130	Petitions to the Commissioner		
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))		
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))		
1801	770	2801	385	Request for Continued Examination (RCE)		
1802	900	1802	900	Request for expedited examination of a design application		

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0.00)

SUBMITTED BY		(Complete if applicable)			
Name (Print/Type)	Mika Mayer	Registration No. (Attorney/Agent)	47,777	Telephone	(650) 813-4298
Signature				Date	March 9, 2004